TENNESSEE GENERAL ASSEMBLY FISCAL REVIEW COMMITTEE



FISCAL MEMORANDUM

SB 277 - HB 325

March 21, 2023

SUMMARY OF BILL AS AMENDED (006206): Permanently extends current law related to various requirements for the prescribing and dispensing of opioid medications.

Establishes that a healthcare practitioner who treats a patient with more than a three-day supply of an opioid is not required to obtain and document informed consent after the first prescription if the subsequent prescription is for the same opioid and for the same episode of treatment. Exempts the treatment of a patient who has concluded active cancer treatment within the immediately preceding six months from certain restrictions and limitations on opioid treatments.

Requires the Commissioner of the Department of Health (DOH) to provide a letter by November 1 of each even-numbered year, relative to the impact and effects of the restrictions and limitations on treating patients with opioids. Requires such updates be submitted to the Governor, the Health and Welfare Committee of the Senate, and the Health Committee of the House of Representatives.

FISCAL IMPACT OF BILL AS AMENDED:

NOT SIGNIFICANT

Assumptions for the bill as amended:

- Public Chapter 1039 (2018) established certain restrictions and limitations on the prescribing and dispensing of opioid medication which are set to expire on June 30, 2023.
- The proposed legislation would remove the sunset provisions and permanently extend such laws as they currently exist.
- Based on information provided by the Department of Finance and Administration, Division of Benefits Administration (Benefits Administration), and the Division of TennCare (Division), the proposed legislation will not have a significant impact on any plans administered by Benefits Administration or the Division.
- Removing these sunset provisions will not have a significant impact on the operations of the DOH or health-related boards.
- The DOH can compile and issue the required reports within existing resources; therefore, any fiscal impact is estimated to be not significant.
- Pursuant to Tenn. Code Ann. § 4-29-121, all health-related boards are required to be self-supporting over a two-year period. The Boards had an annual surplus of \$2,931,602

in FY20-21, an annual surplus of \$2,687,730 in FY21-22, and a cumulative reserve balance of \$37,100,641 on June 30, 2022.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.

Krista Lee Carsner, Executive Director

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